**Supplier CFAT Test Report**

Part Number**:** Enter the Oshkosh and the AOPN

**Part Revision Level:** Enter the part’s drawing revision number/letter

**Part Description:** Enter part description as listed on the drawing

**Supplier Name:** Enter your Company’s Name

**Supplier Cage Code:** Enter your Company’s Cage Code #, not Oshkosh’s

**CFAT PO #:** Enter the # of the PO issued for CFAT or first delivery

**Date of Test:** Enter the start and completion date(s) of CFAT Testing

**Contract:** W56HZV-15-C-0095 / **Clin**: 0020AA

Report #:

**ATTENTION**

A copy of the drawing MUST be included in this CFAT Report document (even for incumbent suppliers), therefore, the report CANNOT be sent via e-mail and MUST be loaded to the Oshkosh Purchasing FTP site. Once the report is uploaded to the FTP site, send a “text only” e-mail to your designated Oshkosh Supplier Quality Engineer (SQE) notifying him/her that the report has been loaded to your Oshkosh Purchasing portal FTP site folder.

**Record of Revisions**

|  |  |  |
| --- | --- | --- |
| Rev # | Rev Date | Description of Revision to CFAT Test Report |
| 01 | 18 May 2016 | Initial revision |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Approval & Authorization**

The Supplier’ Agent listed below certifies that the Component First Article Test (CFAT) Report has been drafted according to the requirements detailed herein, and the test(s) show compliance to all notes on the drawing including the First Article Test requirements.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  | / / |
| ***Name of***  ***Supplier’s Agent*** |  | ***Title of***  ***Supplier’s Agent*** |  | ***Signature of***  ***Supplier’s Agent*** |  | ***Date Report***  ***Approved*** |

**ATTENTION**

This CFAT Report is a deliverable to the U.S. Government as part of a CDRL (Contract Deliverable). This plan must be approved by Oshkosh Defense and Government representatives so prepare it accordingly. Use consistent formatting throughout including charts and illustrations. If a given section of the template is truly not applicable (i.e. Government Facility), list it as “Not Applicable” or “N/A”.

This CFAT Report must be submitted at least **60** days after test comlpetion. Any exceptions to this must be discussed and approved by your assigned SQE. The CFAT Report must include the PPAP workbook, all applicable recorded data, drawings, illustrations and photographs to validate the test(s) and verify results.

**NOTE:** Results from successful CFAT tests MUST be summarized in this CFAT Test Report form available on the Oshkosh Purchasing portal: <http://osn.oshkoshcorp.com>. The tests must show compliance with all notes on the drawing, including the First Article Testing requirements. The accepted document to demonstrate this compliance is the signed Part Submission Warrant (PSW) and approved by an agent of Oshkosh Corporation.The PSW is part of the PPAP submittal, as required by the Oshkosh Supplier Quality Assurance Manual.

**Oshkosh Contact Information**

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**Instructions When Filling Out This Template**

Before filling out this template, please review the CFAT Training Procedure available on the Oshkosh Purchasing portal: <http://osn.oshkoshcorp.com>

CFAT component units MUST be representative of items to be manufactured using the same process, facilities and procedures as will be used for contract production.

CFAT testing shall be performed on a minimum of 2 component units (review specific CFAT notes on the drawing to determine if performance on more than 2 component units is required). The First Article samples must be taken from within the first 10 component units produced for this contract unless otherwise approved by the Government. If First Article samples are not available from within the first 10 component units produced for this contract, the Supplier MUST notify their designated Oshkosh SQE to determine path forward.

If CFAT test fails, the Supplier may be required repeat the CFAT test. Prior to making any necessary changes, modifications or repairs to the First Article samples or selecting another First Article for testing, the Supplier MUST notify their designated Oshkosh SQE.

**Incumbent Certification**

If you are an Incumbent Supplier that has already conducted successful CFAT testing on the component (at its current revision level) in question, please contact your designated Oshkosh SQE. If deemed sufficient, you will be required to a completed Incumbent Supplier form (available on the Oshkosh Purchasing portal) and upload it, along with your previously approved CFAT Test result document, to your Oshkosh Purchasing portal FTP site folder.

**CFAT Part Change Notices (PCNs)**

If changes are made by the supplier to the technical data, production processes, facilities, and/or type of material after successful completion of CFAT testing, a subsequent CFAT may be required. If any of the above conditions occur, the Supplier MUST notify their designated Oshkosh SQE. For further guidance, please review the CFAT Training Procedure available on the Oshkosh Purchasing portal: <http://osn.oshkoshcorp.com>

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1. **Introduction**

1.1 Test / inspection objective(s).

*For example…*

This report outlines how *Company Name Here* met CFAT requirements for drawing *Part Number Here & AOPN* revision *Rev*.

1.2 Item(s) tested/inspected.

a. Nomenclature: *Widget Name From Drawing*

b. National Stock Number: *1234567891234*

c. Part number: *12345678*

d. Type of item: *Production*

e.Serial or lot number: *Insert the lot or serial number here*

f. Applicable engineering changes: *List rev changes/ approved ECP’s*

g. Production item specification: *Ex:Refer to drawing or ASTM / SAE specs*

h. Date of manufacture: Ex:*September 18th, 2018-date of production*

1.3 Test/inspection requirements.

a. Required test/inspection parameters. *Refer to corresponding E002 plan # xxx.*

b. Performance requirements, acceptance or compliance limits, and environmental criteria. *Refer to corresponding E002 plan # xxx.*

1. **Summary**

a. A brief discussion of the significant test/inspection results, observations, conclusions and recommendations:

*For example…PPAP documentation was reviewed for conformance to notes 15a-15d. Applicable quality procedures were reviewed for conformance to the test sample failure note.Performance pressure testing was completed on notes 16 and 17 per SAE J10 3.1.Conformance of the part yields success due to less than 1% permanent circumferential deformation was present. It was determined all print requirements were met.*

b. Proposed corrective actions and schedules for failures or problems encountered:

*If failure occurred during testing,corrective actions must be listed along with schedules for failures or problems.*

c. Identification of deviations, departures, or limitations encountered, referenced to the contract requirements:

*Reference system level or government testing,in relation to component tested if applicable.*

d. Tables, graphs, illustations, or charts as appropriate to simplify the summary data:

*Provide a brief summary or overview of data and explain how performance data was validated.*

1. **Reference Documents**

a. Prior test inspection reports on the same item:

*Include any prior test records that are available. Example: Include testing or performance results from the same part, prior to an ECP approved change. Not applicable? N/A.*

b. Test/Inspection plans and procedure documents”

Reference CDRL E002 XXXXXX, approved *Date*

c. Prior certifications of compliance:

*Include any previous CFAT certifications of compliance. Prior approval, prior acceptance of test data, incumbent form, etc. Not appilacble? N/A.*

d. Contractor’s file designation where test/ inspection records are maintained

*For example… Files stored electronically: Internal company server for extent of contract*. *Include a reference number for a QCP on how records are maintained.*

e. Input parameters used / Applicable Specifications:

*For example…CDRL, MIL Handbook, DID, ASTM, SAE, etc.*

**4.0 Report**

4.1 Test equipment identification. *For example… Reference Appendix D. In Appendix D, copy snd paste the original table of test equipment located in the CFAT plan. Then, add an additional tooling to the table and report any information of new or unforeseen tools used during actual testing. Label accordingly.*

4.2 Test/inspection facility installation and set-up

a. Location or orientation of the item:

b. Location, orientation, or settings of test equipment and instrumentation:

c. Location, orientation or settings of sensors and probes:

d. Location or orientation of interconnections, cables and hoop-ups:

e. Electrical power, pneumatic, fluidic, and hydraulic test requirements:

*Provide a brief summary that includes all of the above information in section 4.2 and refer back to the to the corresponding E002 CFAT plan form. Include additional items such as drawings, illustrations, graphs and photo’s in appendix A, Test Result Matrix.*

(Drawings, illustrations, and photographs may be included in appendices for

Clarification.)

**4.3** Test/Inspection procedures

a. Item selection and inspection that verified suitability for test/inspection:

*For example…Slected at random from the first production lot.*

b. Summarized sequence of testing/Inspection testing steps, including a description of how the item was operated during the test/inspection, and any control conditions that imposed. *For example…Testing was performed MIL-STD-202G, Method 301 as detailed on Cable Assy Requirements drawing number 1234567 Rev A, Section 16.A, 16.B. Reference Appendix A for a summary of the test results and Appendix B for a copy of XYZ companies test report containing a detailed summary of the test sequence, specification and test results.*

4.4 Test/inspection results and analysis

4.4.1 Recorded Data

*Example: The actual recorded data, ie: log book, entries, oscillographs, instrument readings, plotter graphs are provided in Appendix A*.

4.4.2 Test/inspection results

a. See appendix for Test Result Matrix.

b. Discussion of these results as to how they compare to any prior test/inspections:

*For example… Reference Appendix A, Mater Test List. Leverage data of past testing and compare testing with CFAT results if applicable. If no prior testing has been conducted, copy and paste Master Test List from the CFAT plan side by side with the recorded values during the CFAT test. Provide a brief summary of findings.*

c. Calculation examples:

*For example…Torque Calculation: Total torque= T1+T2+T3+T4 = 6fd*

*+6fd+(-)5fd+0=7fd to the clockwise direction. Other examples: Mileage assesments calculations, operational mission failure, welding calculations, etc.*

d. Discussion of anomalies, deviations, discrepancies, or failures, including their impact, causes, and proposed corrective actions. The discussion shall address discrepancies between design requirements and the tested/inspected configuration:

4.5 Conclusions

a. Describe the effectiveness of the test/inspection procedures in meeting item performance. *For example: Provide a brief summary whether or not the parts tested are suitable for JLTV production for the items below.*

b. The success or failure of the item to meet required test/inspection objectives.

c. The need for repeat, additional, or alternative tests/inspections.

d. The need for item redesign or further development.

e. The need for improved test/inspection procedures, techniques, or facilities.

f. The adequacy and completeness of the test/inspection requirements.

4.6 Recommendations

a. Acceptability of the item(s) tested/inspected: *Suitable or not suitable for JLTV production?*

b. Additional testing/inspection is: *Required or not required.*

c. Redesign is: *Required or not required.*

d. Problem resolution is: *Required or not required.*

e.Test/inspection procedure or facility improvements are: *Required or not required.*

f. Disposition of items tested and inspected: *ASK YOUR CFAT COORDINATOR PRIOR TO FILLING THIS IN!* *Example: Dipose at suppliers facility at the customers discretion, ship to government facility, etc.*

g. Documentation changes are: *Required or not required.*

h. Testing/inspection improvements are: *Required or not required.*

**5.0 Authentication**

5.1 Authentication of test/inspection results.

The test/inspection was performed in accordance with applicable test/inspection plans and procedures, and the results are true and accurate.

(The authentication shall include the signature of the contractor personnel that performed the test(s) / inspection(s).)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Print Name

      Date

Title

5.2 Authentication of prior validation.

Those requirements not tested/inspected or measured that were previously

Validated were performed in accordance with applicable test/inspection plans

And procedures, and the results are true and accurate.

(The authentication shall include the signature of a contractor representative authorized to make such authentication.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Print Name

      Date

Title

5.3 Authentication of acceptability.

The item(s) tested and inspected PASSED item acceptability requirements. (This authentication shall include the signature of a contractor representative authorized to make such authentication.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Print Name

      Date

Title

**6.0** **Appendices**

(Appendices shall be used to append detailed test/inspection data, drawings,

Photographs, or other documentation too voluminous to include in the main body

Of the report. This includes referenced documentation not previously provided by

The government, and test/inspection reports from any associated test/inspection

Activity that may have performed some of the testing/inspecting requirements.)

**Appendix A – Test Result Matrix**

**Appendix B- Supporting Documentation**

**Appendix C – PPAP Documentation**

**Appendix D – Test Equipment**

**Additional Appendices (If needed)**